

**TRANSMITTAL LETTER TO THE UNITED STATES  
DESIGNATED/ELECTED OFFICE (DO/EO/US)  
CONCERNING A FILING UNDER 35 U.S.C. 371**

029650-161

U.S.

**10/519790**

37 CFR 1.5)

INTERNATIONAL APPLICATION NO.

PCT/JP2003/008310

INTERNATIONAL FILING DATE

30 June 2003 (30.06.2003)

PRIORITY DATE CLAIMED

1 July 2002 (01.07.2002)

TITLE OF INVENTION

BODY FLUID COLLECTING DEVICE (As Amended)

APPLICANT(S) FOR DO/EO/US

NAKAMURA, Toshihisa; YAGUCHI, Yoshiaki

Applicant herewith submits to the United States Designated/Elected Office (DO/EO/US) the following items and other information:

1. ☒ This is a **FIRST** submission to items concerning a filing under 35 U.S.C. 371.
2. ☐ This is a **SECOND** or **SUBSEQUENT** submission of items concerning a filing under 35 U.S.C. 371.
3. ☐ This is an express request to begin national examination procedures (35 U.S.C. 371(f)). The submission must include items (5), (6), (9) and (22) indicated below.
4. ☐ The US has been elected by the expiration of 19 months from the priority date (Article 31).
5. ☒ A copy of the International Application as filed (35 U.S.C. 371(c)(2))
  - a. ☐ is attached hereto (required only if not communicated by the International Bureau).
  - b. ☒ has been communicated by the International Bureau.
  - c. ☐ is not required, as the application was filed in the United States Receiving Office (RO/US).
6. ☒ An English language translation of the International Application as filed (35 U.S.C. 371(c)(2))
  - a. ☒ is attached hereto.
  - b. ☐ has been previously submitted under 35 U.S.C. 154(d)(4).
7. ☒ Amendments to the claims of the International Application under PCT Article 19 (35 U.S.C. 371(c)(3))
  - a. ☐ are attached hereto (required only if not communicated by the International Bureau).
  - b. ☐ have been communicated by the International Bureau.
  - c. ☐ have not been made; however, the time limit for making such amendments has NOT expired.
  - d. ☒ have not been made and will not be made.
8. ☐ An English language translation of the amendments to the claims under PCT Article 19 (35 U.S.C. 371(c)(3)).
9. ☐ An oath or declaration of the inventor(s) (35 U.S.C. 371(c)(4)).
10. ☐ An English language translation of the annexes of the International Preliminary Examination Report under PCT Article 36 (35 U.S.C. 371(c)(5)).

Items 11 to 21 below concern document(s) or information included:

11. ☐ An Information Disclosure Statement under 37 CFR 1.97 and 1.98.
12. ☐ An assignment document for recording. A separate cover sheet in compliance with 37 CFR 3.28 and 3.31 is included.
13. ☒ A FIRST preliminary amendment.
14. ☐ A SECOND or SUBSEQUENT preliminary amendment.
15. ☐ A substitute specification.
16. ☐ A change of power of attorney and/or address letter.
17. ☐ A computer-readable form of the sequence listing in accordance with PCT Rule 13ter.2 and 37 C.F.R. 1.821 - 1.825.
18. ☐ A second copy of the published international application under 35 U.S.C. 154(d)(4).
19. ☐ A second copy of the English language translation of the international application under 35 U.S.C. 154(d)(4).
20. ☒ Other items or information: General Authorization for Petitions for Extensions of Time and Payment of Fees; Application Data Sheet

|                      |                  |   |  |
|----------------------|------------------|---|--|
| U.S. APPLICATION NO. | <b>10/519790</b> | NATIONAL APPLICATION NO.<br>PCT/JP2003/008310 | ATTORNEY'S DOCKET NUMBER<br>029650-161 |
|----------------------|------------------|---|--|

|   |   |
|---|---|
| <p>21. <input checked="" type="checkbox"/> Applicant(s) requests that the published application include the following assignment information: <u>Terumo Kabushiki Kaisha, Tokyo, Japan</u></p> <p>22. <input checked="" type="checkbox"/> The following fees are submitted:</p> | <p><b>CALCULATIONS PTO USE ONLY</b></p> |
|---|---|

| Basic Filing Fee (1631)  | \$ 300.00    |              |              |                         |             |              |    |       |    |                  |           |                    |   |      |   |                   |         |   |  |  |  |                   |  |                 |  |  |  |                   |           |            |  |  |  |                   |           |  |  |  |  |  |  |                               |  |  |  |  |             |  |  |  |  |   |         |            |  |  |  |  |             |  |  |  |  |  |         |                      |  |  |  |  |             |  |  |  |  |  |  |                       |  |  |  |  |             |  |  |  |  |                         |  |  |  |  |  |           |  |
|--|--------------|--------------|--------------|-------------------------|-------------|--------------|----|-------|----|------------------|-----------|--------------------|---|------|---|-------------------|---------|---|--|--|--|-------------------|--|-----------------|--|--|--|-------------------|-----------|------------|--|--|--|-------------------|-----------|--|--|--|--|--|--|-------------------------------|--|--|--|--|-------------|--|--|--|--|---|---------|------------|--|--|--|--|-------------|--|--|--|--|--|---------|----------------------|--|--|--|--|-------------|--|--|--|--|--|--|-----------------------|--|--|--|--|-------------|--|--|--|--|-------------------------|--|--|--|--|--|-----------|--|
| Surcharge of <b>\$130.00 (1617)</b> for furnishing the oath or declaration later than <input type="checkbox"/> 20 <input type="checkbox"/> 30 months from the earliest claimed priority date (37 CFR 1.492(e)).  |              |              |              |                         |             |              |    |       |    |                  |           |                    |   |      |   |                   |         |   |  |  |  |                   |  |                 |  |  |  |                   |           |            |  |  |  |                   |           |  |  |  |  |  |  |                               |  |  |  |  |             |  |  |  |  |   |         |            |  |  |  |  |             |  |  |  |  |  |         |                      |  |  |  |  |             |  |  |  |  |  |  |                       |  |  |  |  |             |  |  |  |  |                         |  |  |  |  |  |           |  |
| <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 25%;">CLAIMS</th> <th style="width: 15%;">NUMBER FILED</th> <th style="width: 15%;">NUMBER EXTRA</th> <th style="width: 15%;">RATE</th> <th style="width: 30%;">\$</th> </tr> </thead> <tbody> <tr> <td>Total Claims</td> <td>30</td> <td>-20 =</td> <td>10</td> <td>× \$50.00 (1615)</td> <td>\$ 500.00</td> </tr> <tr> <td>Independent Claims</td> <td>3</td> <td>-3 =</td> <td>0</td> <td>× \$200.00 (1614)</td> <td>\$ 0.00</td> </tr> <tr> <td colspan="4">MULTIPLE DEPENDENT CLAIM(S) (if applicable)</td> <td>+ \$360.00 (1616)</td> <td></td> </tr> <tr> <td colspan="4">Examination Fee</td> <td>+ \$200.00 (1633)</td> <td>\$ 200.00</td> </tr> <tr> <td colspan="4">Search Fee</td> <td>+ \$500.00 (1632)</td> <td>\$ 500.00</td> </tr> <tr> <td colspan="4">App. Size Fee (add \$250.00 for each add'l 50 sheets exceeding 100 sheets)</td> <td></td> <td></td> </tr> <tr> <td colspan="4" style="text-align: right;">TOTAL OF ABOVE CALCULATIONS =</td> <td></td> <td>\$ 1,500.00</td> </tr> <tr> <td colspan="4"> <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. The fees indicated above are reduced by 1/2.         </td> <td style="text-align: right;">+</td> <td>\$ 0.00</td> </tr> <tr> <td colspan="4" style="text-align: right;">SUBTOTAL =</td> <td></td> <td>\$ 1,500.00</td> </tr> <tr> <td colspan="4">Processing fee of <b>\$130.00 (1618)</b> for furnishing the English translation later than <input type="checkbox"/> 20 <input type="checkbox"/> 30 months from the earliest claimed priority date (37 CFR 1.492(f)).</td> <td></td> <td>\$ 0.00</td> </tr> <tr> <td colspan="4" style="text-align: right;">TOTAL NATIONAL FEE =</td> <td></td> <td>\$ 1,500.00</td> </tr> <tr> <td colspan="4">Fee for recording the enclosed assignment (37 CFR 1.21(h)). The assignment must be accompanied by an appropriate cover sheet (37 CFR 3.28, 3.31). <b>\$40.00 (8021)</b> per property +</td> <td></td> <td></td> </tr> <tr> <td colspan="4" style="text-align: right;">TOTAL FEES ENCLOSED =</td> <td></td> <td>\$ 1,500.00</td> </tr> <tr> <td colspan="4"></td> <td style="text-align: right;">Amount to be refunded :</td> <td></td> </tr> <tr> <td colspan="4"></td> <td style="text-align: right;">charged :</td> <td></td> </tr> </tbody> </table> | CLAIMS       | NUMBER FILED | NUMBER EXTRA | RATE                    | \$          | Total Claims | 30 | -20 = | 10 | × \$50.00 (1615) | \$ 500.00 | Independent Claims | 3 | -3 = | 0 | × \$200.00 (1614) | \$ 0.00 | MULTIPLE DEPENDENT CLAIM(S) (if applicable) |  |  |  | + \$360.00 (1616) |  | Examination Fee |  |  |  | + \$200.00 (1633) | \$ 200.00 | Search Fee |  |  |  | + \$500.00 (1632) | \$ 500.00 | App. Size Fee (add \$250.00 for each add'l 50 sheets exceeding 100 sheets) |  |  |  |  |  | TOTAL OF ABOVE CALCULATIONS = |  |  |  |  | \$ 1,500.00 | <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. The fees indicated above are reduced by 1/2. |  |  |  | + | \$ 0.00 | SUBTOTAL = |  |  |  |  | \$ 1,500.00 | Processing fee of <b>\$130.00 (1618)</b> for furnishing the English translation later than <input type="checkbox"/> 20 <input type="checkbox"/> 30 months from the earliest claimed priority date (37 CFR 1.492(f)). |  |  |  |  | \$ 0.00 | TOTAL NATIONAL FEE = |  |  |  |  | \$ 1,500.00 | Fee for recording the enclosed assignment (37 CFR 1.21(h)). The assignment must be accompanied by an appropriate cover sheet (37 CFR 3.28, 3.31). <b>\$40.00 (8021)</b> per property + |  |  |  |  |  | TOTAL FEES ENCLOSED = |  |  |  |  | \$ 1,500.00 |  |  |  |  | Amount to be refunded : |  |  |  |  |  | charged : |  |
| CLAIMS   | NUMBER FILED | NUMBER EXTRA | RATE         | \$                      |             |              |    |       |    |                  |           |                    |   |      |   |                   |         |   |  |  |  |                   |  |                 |  |  |  |                   |           |            |  |  |  |                   |           |  |  |  |  |  |  |                               |  |  |  |  |             |  |  |  |  |   |         |            |  |  |  |  |             |  |  |  |  |  |         |                      |  |  |  |  |             |  |  |  |  |  |  |                       |  |  |  |  |             |  |  |  |  |                         |  |  |  |  |  |           |  |
| Total Claims   | 30           | -20 =        | 10           | × \$50.00 (1615)        | \$ 500.00   |              |    |       |    |                  |           |                    |   |      |   |                   |         |   |  |  |  |                   |  |                 |  |  |  |                   |           |            |  |  |  |                   |           |  |  |  |  |  |  |                               |  |  |  |  |             |  |  |  |  |   |         |            |  |  |  |  |             |  |  |  |  |  |         |                      |  |  |  |  |             |  |  |  |  |  |  |                       |  |  |  |  |             |  |  |  |  |                         |  |  |  |  |  |           |  |
| Independent Claims   | 3            | -3 =         | 0            | × \$200.00 (1614)       | \$ 0.00     |              |    |       |    |                  |           |                    |   |      |   |                   |         |   |  |  |  |                   |  |                 |  |  |  |                   |           |            |  |  |  |                   |           |  |  |  |  |  |  |                               |  |  |  |  |             |  |  |  |  |   |         |            |  |  |  |  |             |  |  |  |  |  |         |                      |  |  |  |  |             |  |  |  |  |  |  |                       |  |  |  |  |             |  |  |  |  |                         |  |  |  |  |  |           |  |
| MULTIPLE DEPENDENT CLAIM(S) (if applicable)  |              |              |              | + \$360.00 (1616)       |             |              |    |       |    |                  |           |                    |   |      |   |                   |         |   |  |  |  |                   |  |                 |  |  |  |                   |           |            |  |  |  |                   |           |  |  |  |  |  |  |                               |  |  |  |  |             |  |  |  |  |   |         |            |  |  |  |  |             |  |  |  |  |  |         |                      |  |  |  |  |             |  |  |  |  |  |  |                       |  |  |  |  |             |  |  |  |  |                         |  |  |  |  |  |           |  |
| Examination Fee  |              |              |              | + \$200.00 (1633)       | \$ 200.00   |              |    |       |    |                  |           |                    |   |      |   |                   |         |   |  |  |  |                   |  |                 |  |  |  |                   |           |            |  |  |  |                   |           |  |  |  |  |  |  |                               |  |  |  |  |             |  |  |  |  |   |         |            |  |  |  |  |             |  |  |  |  |  |         |                      |  |  |  |  |             |  |  |  |  |  |  |                       |  |  |  |  |             |  |  |  |  |                         |  |  |  |  |  |           |  |
| Search Fee   |              |              |              | + \$500.00 (1632)       | \$ 500.00   |              |    |       |    |                  |           |                    |   |      |   |                   |         |   |  |  |  |                   |  |                 |  |  |  |                   |           |            |  |  |  |                   |           |  |  |  |  |  |  |                               |  |  |  |  |             |  |  |  |  |   |         |            |  |  |  |  |             |  |  |  |  |  |         |                      |  |  |  |  |             |  |  |  |  |  |  |                       |  |  |  |  |             |  |  |  |  |                         |  |  |  |  |  |           |  |
| App. Size Fee (add \$250.00 for each add'l 50 sheets exceeding 100 sheets)   |              |              |              |                         |             |              |    |       |    |                  |           |                    |   |      |   |                   |         |   |  |  |  |                   |  |                 |  |  |  |                   |           |            |  |  |  |                   |           |  |  |  |  |  |  |                               |  |  |  |  |             |  |  |  |  |   |         |            |  |  |  |  |             |  |  |  |  |  |         |                      |  |  |  |  |             |  |  |  |  |  |  |                       |  |  |  |  |             |  |  |  |  |                         |  |  |  |  |  |           |  |
| TOTAL OF ABOVE CALCULATIONS =  |              |              |              |                         | \$ 1,500.00 |              |    |       |    |                  |           |                    |   |      |   |                   |         |   |  |  |  |                   |  |                 |  |  |  |                   |           |            |  |  |  |                   |           |  |  |  |  |  |  |                               |  |  |  |  |             |  |  |  |  |   |         |            |  |  |  |  |             |  |  |  |  |  |         |                      |  |  |  |  |             |  |  |  |  |  |  |                       |  |  |  |  |             |  |  |  |  |                         |  |  |  |  |  |           |  |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. The fees indicated above are reduced by 1/2.   |              |              |              | +                       | \$ 0.00     |              |    |       |    |                  |           |                    |   |      |   |                   |         |   |  |  |  |                   |  |                 |  |  |  |                   |           |            |  |  |  |                   |           |  |  |  |  |  |  |                               |  |  |  |  |             |  |  |  |  |   |         |            |  |  |  |  |             |  |  |  |  |  |         |                      |  |  |  |  |             |  |  |  |  |  |  |                       |  |  |  |  |             |  |  |  |  |                         |  |  |  |  |  |           |  |
| SUBTOTAL =   |              |              |              |                         | \$ 1,500.00 |              |    |       |    |                  |           |                    |   |      |   |                   |         |   |  |  |  |                   |  |                 |  |  |  |                   |           |            |  |  |  |                   |           |  |  |  |  |  |  |                               |  |  |  |  |             |  |  |  |  |   |         |            |  |  |  |  |             |  |  |  |  |  |         |                      |  |  |  |  |             |  |  |  |  |  |  |                       |  |  |  |  |             |  |  |  |  |                         |  |  |  |  |  |           |  |
| Processing fee of <b>\$130.00 (1618)</b> for furnishing the English translation later than <input type="checkbox"/> 20 <input type="checkbox"/> 30 months from the earliest claimed priority date (37 CFR 1.492(f)).   |              |              |              |                         | \$ 0.00     |              |    |       |    |                  |           |                    |   |      |   |                   |         |   |  |  |  |                   |  |                 |  |  |  |                   |           |            |  |  |  |                   |           |  |  |  |  |  |  |                               |  |  |  |  |             |  |  |  |  |   |         |            |  |  |  |  |             |  |  |  |  |  |         |                      |  |  |  |  |             |  |  |  |  |  |  |                       |  |  |  |  |             |  |  |  |  |                         |  |  |  |  |  |           |  |
| TOTAL NATIONAL FEE =   |              |              |              |                         | \$ 1,500.00 |              |    |       |    |                  |           |                    |   |      |   |                   |         |   |  |  |  |                   |  |                 |  |  |  |                   |           |            |  |  |  |                   |           |  |  |  |  |  |  |                               |  |  |  |  |             |  |  |  |  |   |         |            |  |  |  |  |             |  |  |  |  |  |         |                      |  |  |  |  |             |  |  |  |  |  |  |                       |  |  |  |  |             |  |  |  |  |                         |  |  |  |  |  |           |  |
| Fee for recording the enclosed assignment (37 CFR 1.21(h)). The assignment must be accompanied by an appropriate cover sheet (37 CFR 3.28, 3.31). <b>\$40.00 (8021)</b> per property +   |              |              |              |                         |             |              |    |       |    |                  |           |                    |   |      |   |                   |         |   |  |  |  |                   |  |                 |  |  |  |                   |           |            |  |  |  |                   |           |  |  |  |  |  |  |                               |  |  |  |  |             |  |  |  |  |   |         |            |  |  |  |  |             |  |  |  |  |  |         |                      |  |  |  |  |             |  |  |  |  |  |  |                       |  |  |  |  |             |  |  |  |  |                         |  |  |  |  |  |           |  |
| TOTAL FEES ENCLOSED =  |              |              |              |                         | \$ 1,500.00 |              |    |       |    |                  |           |                    |   |      |   |                   |         |   |  |  |  |                   |  |                 |  |  |  |                   |           |            |  |  |  |                   |           |  |  |  |  |  |  |                               |  |  |  |  |             |  |  |  |  |   |         |            |  |  |  |  |             |  |  |  |  |  |         |                      |  |  |  |  |             |  |  |  |  |  |  |                       |  |  |  |  |             |  |  |  |  |                         |  |  |  |  |  |           |  |
|  |              |              |              | Amount to be refunded : |             |              |    |       |    |                  |           |                    |   |      |   |                   |         |   |  |  |  |                   |  |                 |  |  |  |                   |           |            |  |  |  |                   |           |  |  |  |  |  |  |                               |  |  |  |  |             |  |  |  |  |   |         |            |  |  |  |  |             |  |  |  |  |  |         |                      |  |  |  |  |             |  |  |  |  |  |  |                       |  |  |  |  |             |  |  |  |  |                         |  |  |  |  |  |           |  |
|  |              |              |              | charged :               |             |              |    |       |    |                  |           |                    |   |      |   |                   |         |   |  |  |  |                   |  |                 |  |  |  |                   |           |            |  |  |  |                   |           |  |  |  |  |  |  |                               |  |  |  |  |             |  |  |  |  |   |         |            |  |  |  |  |             |  |  |  |  |  |         |                      |  |  |  |  |             |  |  |  |  |  |  |                       |  |  |  |  |             |  |  |  |  |                         |  |  |  |  |  |           |  |

a. ☐ A check in the amount of \_\_\_\_\_ to cover the above fees is enclosed.

b. ☐ Please charge my Deposit Account No. 02-4800 in the amount of \_\_\_\_\_ to cover the above fees. A duplicate copy of this sheet is enclosed.

c. ☒ The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account No. 02-4800. A duplicate copy of this sheet is enclosed.

d. ☒ Charge \$ 1,500.00 to credit card. Form PTO-2038 is attached.

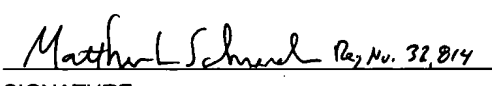

**NOTE:** Where an appropriate time limit under 37 CFR 1.494 or 1.495 has not been met, a petition to revive (37 CFR 1.137(a) or (b)) must be filed and granted to restore the application to pending status.

SEND ALL CORRESPONDENCE TO:

Burns, Doane, Swecker & Mathis, L.L.P.  
P.O. Box 1404  
Alexandria, Virginia 22313-1404  
(703) 836-6620

  
 SIGNATURE  
 Platon N. Mandros  
 NAME  
22,124 December 29, 2004  
 REGISTRATION NO. DATE